PTO/SB/17 (10-08)
Approved for use through 06/30/2010. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Par	perwork Reducti	ion Act of 199	5, no person are re	quired to	respond to a collection of information unless it displays a valid OMB control number						
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).					Complete if Known Application Number 10/741,798-Conf. #5599						
					Applicati		iber			}	
FEE TRANSMITTAL					Filing Date			December 19, 2003			
For FY 2009								Susan P. Dark			
					Examine	r Name	\longrightarrow	J. M. Rutkows	;KI		
X Applicant claims small entity status. See 37 CFR 1.27					Artonic			2416			
TOTAL AMOUNT	Attorney	Attorney Docket No. 58895/P001C1/10316486									
METHOD OF PAYMENT (check all that apply)											
Check X Credit Card Money Order None Other (please identify):											
Deposit Account Deposit Account Number: 06-2380 Deposit Account Name: Fulbright & Jaworski L.L.P.											
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)											
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee											
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17											
FEE CALCULATION											
1. BASIC FILING, SEARCH, AND EXAMINATION FEES											
		FILIN	G FEES	SE	ARCH FE		EXAMII	NATION FEES	}		
Application Ty	pe	Fee (\$)	Small Entity Fee (\$)	Fee (\$		Entity	Fee (\$)	Small Entity Fee (\$)	<u>Fees</u>	Paid (\$)	
Utility	-	330	165	540		70	220	110	<u> </u>		
Design		220	110	100		50	140	70			
Plant		220	110	330	10	65	170	85			
Reissue		330	165	540	2	70	650	325			
Provisional		220	110	0		0	0	0			
2. EXCESS CLA	IM FEES								_	Small Entity	
Fee Description									<u>Fee (\$)</u>	<u>Fee (\$)</u>	
Each claim over 20 (including Reissues)									52	26	
Each independer					220	110					
Multiple dependent claims					D-:-! (A) 84			e wat Danan	390	195	
69	69 -74 or HP x =							Multiple Dependent Claims ee (\$) Fee Paid (\$)			
HP = highest numb				_				_			
Indep. Claims		a Claims	Fee (\$)	F	ee Paid (\$	<u>;) </u>					
7	7 or HP = ber of independe	ent claims paid		n 3.							
3. APPLICATIO											
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).											
l .							rtion there	of Fee (\$)	Fee	Paid (\$)	
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = /50 = (round up to a whole number) x =											
4. OTHER FEE(S) Fees Paid (\$)											
		n, \$130 fe	e (no small ent	tity disc	ount)				-		
Other (e.g., late filing surcharge): 2801 Request for continued examination (RCE) (see 37 405.00											
SUBMITTED BY											
Signature	7	#			Registratio (Attorney/A		54,214	Telephone	(214) 8	55-7115	
Name (Print/Type)	Thomas K	elton			14	,,,,,	**	Date	June 2	9, 2009	
Fee Transmittal I hereby certify that this paper (along with any paper referred to as being affached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4).											
Dated: June 29, 2009 Signature:											

Dated: June 29, 2009